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## BIB DATA SHEET

CONFIRMATION NO. 4898

| SERIAL NUMBER  | FILING or 371(c)<br>DATE  | CLASS                             | GROUP ART UNIT  | ATTORNEY DOCKET<br>NO.        |
|--|---|-----------------------------------|---|-------------------------------|
| 09/997,962   | 11/29/2001  | 604                               | 3626  | DOCUSY 3.0-007                |
| <b>APPLICANTS</b><br>Robert Hanson, Mobile, AL;<br>Barry Sudduth, Central, SC;<br>Don Detar, Lilburn, GA;  |   |                                   |   |                               |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/253,911 11/29/2000  |   |                                   |   |                               |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                                   |   |                               |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>12/17/2001  |   |                                   |   |                               |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /DILEK B<br>COBANOGU/<br>Examiner's Signature<br>Acknowledged | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>AL | <b>SHEETS<br/>DRAWINGS</b><br>3   | <b>TOTAL<br/>CLAIMS</b><br>36 |
| <b>INDEPENDENT<br/>CLAIMS</b><br>6   |   |                                   |   |                               |
| <b>ADDRESS</b><br>LERNER, DAVID, LITTENBERG,<br>KRUMHOLZ & MENTLIK<br>600 SOUTH AVENUE WEST<br>WESTFIELD, NJ 07090<br>UNITED STATES  |   |                                   |   |                               |
| <b>TITLE</b><br>Drug delivery device incorporating a tracking code   |   |                                   |   |                               |
| <b>FILING FEE<br/>RECEIVED</b><br>705  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                               |